

My wife takes a drug called Synthroid. She has a problem with goiter. Synthroid in the United States, 50 tablets of 50 milligrams sells for about \$21.95. You can buy that exact same drug probably made in the same plant under the same FDA approval in Germany for only \$4. So \$21.95 in the United States, \$4 in Germany.

Then I come to the one that really chaps my hide because we hear about the reason these drugs are so expensive is because it is so expensive to develop them, the research and development costs. And I recognize there are costs, but let us talk about tamoxifen, which was essentially developed by the NIH. So we paid for it. The American taxpayers paid for virtually all of the research and development. We bought 60 tablets, 20 milligrams of tamoxifen in Munich, Germany, for \$60. That same drug in the same package sells in the United States for \$360.

Now, tamoxifen is a very effective drug against women's breast cancer. We are happy to pay our fair share for the research costs; but as I always say, we ought to be willing to subsidize the poor people in sub-Saharan Africa, we should not be required to subsidize the starving Swiss.

And that is what is happening today because American consumers are being held captive. Some people ask why are prices so much cheaper in Europe. Well, in part they have something called price controls. That is part of the answer, but it is not the whole answer. They also allow in Germany, for example, they allow German pharmacists to do parallel trading. So the German pharmacist can order the drug wherever they can get it the cheapest. That is called competition. That is how markets work.

Mr. Speaker, I have introduced a bill called the Market Access Act, which would allow American pharmacists and American consumers to have that same kind of opportunity to go into the world markets. There are roughly 25 countries that are already recognized as having similar FDA-type regimens as we have in the United States, 25 countries are already recognized in the statute, and the bill I have would allow our pharmacists and our consumers to have access to those markets.

It may not be the perfect answer, but if Members do not like my plan, what is your plan? What is the administration's plan? What are we going to do about this? Because I will tell Members if next year we come back, and if Americans are still required to pay six times the amount for the same anticancer drug, they are not going to say shame on the pharmaceutical industry, they are going to say shame on us.

The time has come to make certain that Americans have access to world-class drugs at world market prices.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from the District of Columbia

(Ms. NORTON) is recognized for 5 minutes.

(Ms. NORTON addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

EXCHANGE OF SPECIAL ORDER TIME

Ms. JACKSON-LEE of Texas. Mr. Speaker, I ask unanimous consent to claim the time of the gentlewoman from the District of Columbia (Ms. NORTON).

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

LABOR-HHS APPROPRIATIONS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Ms. JACKSON-LEE) is recognized for 5 minutes.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I would say to my good friend that previously spoke on the issue of dealing with the high cost of prescription drugs, I accept the challenge, and I believe it is crucial that this House address this question, and it is a travesty that our senior citizens and others are bearing this enormous burden.

I hope that we can get to work as a House on behalf of the people of this Nation. It seems too long that we have come to the floor and simply acknowledged that we are here either paddling water, swimming upstream, and maybe causing the American people to drown. We are in this boat, leaking boat, because we decided, the majority did, a few months ago, that it was more important to give a \$550 billion tax cut of which the richest of Americans will get somewhere about \$90,000, and then as we decided to strip our finances to its bare bones, we now come and debate today on the floor of the House in a couple of hours one of the most appropriations bills we will ever see in the course of this season of appropriations.

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And that is the Labor-HHS bill dealing with the neediest of Americans, but frankly dealing with all Americans. And, Mr. Speaker, I think it is important to simply call the roll with respect to what we did today. We passed a bill, although very narrowly, that breaks all of the promises to Americans who have worked hard, who have contributed to this country, and who believe that we in this Congress are here to provide them with a big umbrella, the necessities of life that they have helped build in this Nation.

But what did we do? We cut overall education funding. We promised \$3 billion, but in this budget we only had \$2.3 billion or a 4.3 percent increase. So in essence, we have left many children behind. This bill only provides a \$382 million, or 1.6 percent, increase over current funding for the Leave No Child Behind Act. So in essence we have mil-

lions of children that will not be served because of the bill we passed today. In real terms this funding is \$8 billion short of what we need. Special education that I thought was an issue that all of us can come together around, we absolutely left that standing by the wayside, a \$1.2 billion shortfall so the children that need special ed, the teachers that need to be in the classrooms to give our children that extra added lift will not exist. On title I funding for the poorest of our children, \$12.35 billion provided in the bill, it is \$334 million short. The title I program will eliminate being able to serve 9 million children. It was promised for 9 million children, and yet we will not have that amount of money.

It reduces our commitment to support college education. It reduces the amount of Pell grants compared to 84 percent when Pell grants were first established. This amount only meets 38 percent of college costs. Nearly 5 million students depend on Pell grants. The majority of them have incomes of \$30,000 or less. And one of the things that we note in this country is that education is the great equalizer, but we passed a bill today that totally eliminates opportunities for millions of children.

In Houston, in the heat of the summer, Texas and southern States do not get LIHEAP moneys, but every year we face a heating crisis. When I say that, it is too hot and we do not have the resources to provide individuals with cooling dollars. Every year I organize a heat crisis team to go out and solicit air conditioners because my senior citizens and the disabled and others do not have the resources. But yet we can cut the LIHEAP moneys and treat those southern States that may not have the cold weather but have the hot weather in an unfair status. National Institutes for Health moneys have been cut drastically. So we have cut right at the heart the major resources for research that can help save lives.

I heard our President himself speak about community health centers, the need to bring health clinics closer to the people. But what do we do? Our community health centers serve 13 million people who lack access to health care in rural and urban areas, and yet we have inadequately funded those so the very local communities that were trying to bring health care to our rural communities, obviously no help.

Unemployment programs, Mr. Speaker, can my colleagues believe it? Unemployment at its all-time high, 6.4 percent, the highest in 9 years. African Americans at a rate of 1.971 million unemployed African Americans. The number of unemployed has reached 9.4 million. But yet we voted on a bill today, which I voted against, unfortunately it passed by the Republicans, of course, that takes money away from unemployment programs, \$150.8 million. We take money away from homeland security. We take money away from helping the nursing shortage.